

State Employee Health Plan

Open Enrollment 2014

State Employees and Non State Employer Groups

Choose Your Health Benefits

Enrollment Period is October 1 - October 31, 2013.

Open enrollment elections are effective January 1, 2014.



**Cover photo is titled "Road into the Field" from the Postcards from Kansas collection by Dave Leiker.

Contact Information

State of Kansas Health Plan Vendors Web Site

www.kdheks.gov/hcf/sehp/Vendors.htm

Blue Cross and Blue Shield of Kansas

Customer Service Plan A, Plan B and Plan C

New Directions (Behavioral Health)

www.bcbsks.com/CustomerService/Members/State/

All Areas (Toll Free): 800-332-0307

Topeka: 785-291-4185

All Areas (Toll Free): 800-952-5906

Topeka: 785-233-1165

Coventry

Customer Service Plan A, Plan B and Plan C

Behavioral Health (MHNet)

www.chckansas.com

All Areas (Toll Free): 855-326-2088

All Areas (Toll Free): 866-607-5970

UnitedHealthcare

Customer Service Plan A, Plan B, Plan C
and Optimum Behavioral Health

www.welcometouhc.com/kansas

All Areas (Toll Free): 866-799-1324

Preferred Lab Benefit Program - Plans A and B only

- **Quest Diagnostics Lab Card Program**

Customer Service

Collection Site Listings

www.labcard.com

All Areas (Toll Free): 800-646-7788

www.labcard.com/collection.html

- **Stormont-Vail Regional Lab Program**

Customer Service

Benefit Information and Collection Site Listings

www.stormontvail.org/stateemployeeslab.html

All Areas (Toll Free): 800-637-4716

Topeka: 785-354-1150

Delta Dental of Kansas, Inc.

Customer Service

www.deltadentalks.com

All Areas (Toll Free): 800-234-3375

Wichita: 316-264-4511

Caremark

Customer Service

Caremark Connect Specialty Pharmacy

www2.caremark.com/kse

All Areas (Toll Free): 800-294-6324

TDD (Toll Free): 800-863-5488

All Areas (Toll Free): 800-237-2767

Superior Vision Services

Customer Service

www.superiorvision.com

All Areas (Toll Free): 800-507-3800

**NueSynergy - Flexible Spending Accounts
State Employees Only**

Customer Service

www.KansasFSA.com

All Areas (Toll Free): 855-750-9440

Fax (Toll Free): 855-890-7238

US Bank - Health Savings Account with Plan C

Customer Service

www.mycdh.usbank.com

All Areas (Toll Free): 877-470-1771

Alere - HealthQuest Wellness Program

www.kansashealthquest.com

All Areas (Toll Free): 888-275-1205

ComPsych - Employee Assistance Program

www.healthquesteap.com

All Areas (Toll Free): 888-275-1205 (option 7)

COBRAGuard - COBRA Administrator

Customer Service

www.cobraguard.net

All Areas (Toll Free): 866-952-6272

Fax: 913-438-8385

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View all Open Enrollment information, including the Provider Directories, benefit descriptions and detailed information on all State Employee Health Plan programs and options available at www.kdheks.gov/hcf/sehp/default.htm

State Employee Online Open Enrollment Webinars

Sign on details will be e-mailed the week before each meeting

Monday	September 30, 2013	10:30 a.m. and 1:30 p.m.
Friday	October 11, 2013	9:30 a.m.
Thursday	October 17, 2013	9:30 a.m. and 3:00 p.m.
Thursday	October 24, 2013	9:30 a.m.

The information in this booklet is intended to summarize the benefits offered in language that is clear and easy to understand. Every effort has been made to ensure that this information is accurate. It is not intended to replace the legal plan document (Benefit Description), which contains the complete provisions of a program. In case of any discrepancy between this booklet and the legal plan document, the legal plan document will govern in all cases. You may review the legal plan document upon request or go to www.kdheks.gov/hcf/sehp/BenefitDescriptions.htm Benefit Descriptions are listed under each vendor.

Highlights for Plan Year 2014

WHAT'S CHANGING

HEALTH PLANS:

Plans A and B ONLY -

- Urgent Care facility visits - office charge will be subject to a \$50 copay. Additional testing, sutures or other services will be subject to deductible and coinsurance.
- Deductible, Copays and Coinsurance apply to the Out of Pocket (OOP) maximum - See Comparison Chart.
- Annual Coinsurance and Copay maximum has increased - See Comparison Chart.

Plans A, B and C - Plan Design Changes

- Removal of the dollar limit on durable medical equipment
- Preventive Care Adjustments:
 - Well Woman Care
 - Add coverage for OTC contraceptives, if prescribed
 - Add coverage for BRCA gene testing for breast cancer
 - Add HIV testing for sexually active women
 - Polyp removal during colonoscopy is now included
 - Coverage for aspirin prescribed to reduce heart attacks

PRESCRIPTION DRUG COVERAGE

- **Plans A and B** - Non preferred drugs will be counted toward meeting the coinsurance maximums in PY2014, Coinsurance Maximums will be as follows:
 - Individual will be increased to \$2,750
 - Family will be set at \$5,500 - **NEW**

NEW FLEXIBLE SPENDING ACCOUNT VENDOR

- NueSynergy will be responsible for administering the FSA Program beginning January 1, 2014. The State of Kansas FSA Portal is www.KansasFSA.com

NEW HEALTHQUEST EMPLOYEE ASSISTANCE PROGRAM VENDOR

- ComPsych will be administering the HealthQuest EAP Program beginning January 1, 2014.

HEALTH SAVINGS ACCOUNT WITH PLAN C HIGH DEDUCTIBLE HEALTH PLAN (HDHP)

New Maximum Contribution Levels (Including employer contribution)

- **Single Coverage** - \$3,300 **Family Coverage** - \$6,550

State Employees - the Employer HSA contribution amount will be made in two equal installments for Plan Year 2014.

- **For employees not enrolled in an FSA or with a zero balance in their Health Care FSA on December 31, 2013**, the 1st installment will be made during the 2nd pay period in January and the 2nd will be made during the 1st pay period in July.
- **For employees with a balance in their Health Care FSA on December 31, 2013**, the 1st installment will be made after March 15th on a prorated basis and the 2nd will be made during the 1st pay period in July.

Non State Employer Group (NSE Group) - Employees will need to check with their employer to see when the Employer HSA contribution will be made.

Both State and NSE Group Employer HSA contributions for new enrollments during the Plan Year will continue to be pro-rated.

WHAT'S NEW

- **Autism Spectrum Disorder coverage** is now a permanent benefit. Coverage details are in the benefit description.
- **Coverage for Bariatric Service for qualified patients.** Coverage details are in the benefit description.

Differences Between Active State and Non State Employer Groups

State Employees - Enroll Online through the Employee Self Service Center at www.kansas.gov/employee

REMEMBER TO:

- Select and enroll in your health plan options for PY 2014.
- Apply for **HealthyKIDS** if you qualify - annual enrollment is required. See page 9 of this book or go to www.kdheks.gov/hcf/sehp/HealthyKIDS.htm
- Enroll in **Flexible Spending Accounts** - annual enrollment is required. See page 17 of this book or go to www.kdheks.gov/hcf/sehp/FSA.htm
- Provide documentation for any new dependents to your human resource office (benefit contact) by October 31st.

Non State Employer Group (NSE Group) - Enroll Online through the Kansas employee eligibility portal at www.hrisuite.com

REMEMBER TO:

- Select and enroll in your health plan options for PY 2014.
- Provide documentation for any new dependents to your human resource office (benefit contact) by October 31st.

Enrolling for Health Care Benefits

The Annual Open Enrollment Period (October 1 through October 31)

Your benefit elections become effective January 1 of the following year. Your decisions are binding until the next annual open enrollment period (unless you experience a “qualifying event” that allows you to make a change; see the **Changing Your Coverage** section on the next page for details).

Newly Hired or Newly Eligible Employees

You have 31 days after the date you are hired or become eligible to enroll in your choice of coverage. Your coverage will become effective on the first day of the month after the completion of a 30-day waiting period. If you do not enroll by the deadline, you will not be eligible to enroll until the next open enrollment period (unless you experience a “qualifying event” that allows you to make a change; see the **Changing Your Coverage** section on the next page for details).

Who Can Be Covered

In addition to covering yourself, you also can elect coverage for your eligible dependents. Your eligible dependents include:

- Your lawful spouse.
- Your child(ren) or stepchild(ren). To be covered under your health plan, your child or stepchild must be under the age of 26.

Documentation for each eligible dependent covered under the health plan, (such as a birth certificate or marriage license) must be submitted to your human resource office benefit contact no later than October 31st. Please print your full name, employee ID number and agency/group name on each piece of documentation. If dependent documentation is not received by this deadline, the dependents will not be enrolled for coverage effective January 1st.

Changing Your Coverage

Qualifying events include life-altering events such as the birth or adoption of a child, marriage, divorce, death of a spouse or a dependent, or gain or loss of employment and benefits for a spouse or a dependent.

Note: In the event of a divorce, coverage for your former spouse and stepchild(ren) ends on the last day of the month during which the divorce is finalized.

Important: Health plan changes due to a qualifying event must be consistent with the event. You must submit a completed Enrollment or Change Form, with any required documentation, to your employer's human resource office or benefit contact person within 31 days of the qualifying event in order for the change to be effective the first day of the month following the event. If the event takes place on the first day of the month, the effective date will be that day. If you do not submit your change form within this 31-day period, you will not be able to make the change until the next open enrollment period.

List of Qualified Dependents and Qualifying Events

For a complete list, consult the Employee Guidebook for your group

- **State Employees** - www.kdheks.gov/hcf/sehp/download/Active-EEGuide.pdf
- **NSE Group Members** - www.kdheks.gov/hcf/sehp/download/NSEGroup-EEGuide.pdf

Paying for Your Coverage

- Both you and your employer share in the cost of your health care benefits with your employer paying the majority of the cost. State employee contributions may be paid on a pre-tax or after-tax basis. The pre-tax option reduces your taxable income and therefore your taxes.
- Employee contributions for all health plans, the Health Savings Account (HSA) with Plan C, and the Flexible Spending Accounts (FSAs) (**State Employees only**) are deducted from your paychecks.

State Employees - the rate for each benefit option is shown in the comparison chart included with this booklet. Your rate depends on the options you choose, your salary tier and whether you are paid on a semi-monthly (24) or 16 times per-year basis.

NSE Group Members - Speak with your benefit contact person for employee rates.

Before You Enroll

- **REVIEW ALL OF YOUR ENROLLMENT MATERIALS** to become familiar with your options. This includes this *Choose Your Health Benefits* enrollment booklet, *Health Plan Comparison Chart* and our website -www.kdheks.gov/hcf/sehp/default.htm for information on health plans, vendors, etc.
- **ATTEND AN OPEN ENROLLMENT MEETING OR ONLINE WEBINAR.** We strongly encourage you to attend either an open enrollment meeting or online webinar to hear detailed explanations of your benefit options and get answers to any questions you may have.
 - State Employees** - Check the schedule of meetings posted on our website at www.kdheks.gov/hcf/sehp/Active/Meetings.htm
 - NSE Group Members** - Contact your HR department benefit person for the dates and times of meetings near you.
- **THINKING ABOUT CHANGING YOUR HEALTH PLAN VENDOR?** Before you make a change, be sure your doctors and hospital participate with the new vendor you select for Plan Year 2014. Each vendor (BCBS of Kansas, Coventry, UnitedHealthcare) has a unique provider network. Review the provider directory listed on their page of our website at www.kdheks.gov/hcf/sehp/Vendors.htm
- **ADDING DEPENDENTS TO YOUR PLAN?** If you have **not** previously submitted the required documentation (such as a birth certificate or marriage license) for the dependent being added, you will need to do so at enrollment. Other pieces of information needed for each new dependent are: his or her full name, Social Security number, gender and birth date. Required documentation must be submitted to your human resource office (benefit contact) by October 31, 2013.

All documentation must be received by Membership Services no later than 5:00 p.m., Friday, November 8, 2013. If dependent documentation is not received by this date, the dependent(s) will not be enrolled in the health plan effective January 1, 2014.

QUESTIONS?

- **Contact the vendor.** Toll free customer service numbers are listed on the inside cover of this booklet.
- **Visit our website** - www.kdheks.gov/hcf/sehp/default.htm
- **Send an e-mail** to benefits@kdheks.gov
- **State Employees** - contact your agency human resource office.
- **Non State Employer Group Members** - speak with your benefit contact person.

FOR STATE EMPLOYEES

BEFORE OCTOBER 1ST, set up your password on the Employee Self Service (ESS) Center – www.kansas.gov/employee -You can use any computer with Internet access - at work, home, a Job Service Center, or at most public libraries.

First-time users or members who need help accessing this web site can call the Help Desk at either 785-296-1900 (Topeka) or 866-999-3001 (Toll Free). The Help Desk is open from 8:00am to 4:30pm Monday - Friday and can provide instructions on how to log in and create a password. Once you have logged in, update your profile by including your e-mail address and set up a secret question and answer. The secret question will be asked if you forget your password.

Online Enrollment

FOR STATE EMPLOYEES

BETWEEN OCTOBER 1st and 31st ENROLL ONLINE

1. Go to the Employee Self Service (ESS) Center at www.kansas.gov/employee
2. Select the Self Service button under "Featured Sites"
3. Select Sign In
4. From there, follow the enrollment instructions on the screen
5. When you are finished, be sure to submit and save the online open enrollment form
6. Print a copy for your records as proof of your enrollment

First-time users or members who need help accessing this web site can call the Help Desk at either 785-296-1900 (Topeka) or 866-999-3001 (Toll Free). The Help Desk is open from 8:00am to 4:30pm Monday - Friday and can provide instructions on how to log in and create a password. Once you have logged in, update your profile by including your e-mail address and set up a secret question and answer. The secret question will be asked if you forget your password.

As part of the online enrollment process, you will:

- Select your Health Plan Vendor - BCBS of Kansas, Coventry or UnitedHealthcare and level of coverage (Employee only, Employee & Spouse, Employee & Child(ren) or Employee & Family)
- Select your dental coverage level (Employee only, Employee & Spouse, Employee & Child(ren) or Employee & Family)
- Select optional vision coverage - Basic or Enhanced and level of coverage (Employee only, Employee & Spouse, Employee & Child(ren) or Employee & Family)
- Add any new dependents to your plan

REMEMBER TO:

- Apply for *HealthyKIDS* -if you qualify - annual enrollment is required.
See page 9 of this book or go to www.kdheks.gov/hcf/sehp/HealthyKIDS.htm
- Enroll in *Flexible Spending Accounts* - annual enrollment is required.
See page 17 of this book or go to www.kdheks.gov/hcf/sehp/FSA.htm
- Provide documentation for new dependents to your human resource office (benefit contact) by October 31st.

Confirmation statements will be available online after 12/1/13.

FOR NON STATE EMPLOYER GROUP (NSE Group) MEMBERS

Beginning October 1st, NSE Group members may enroll online using any computer with Internet access - at work, home, or at most public libraries.

- Go to the Kansas employee eligibility portal - www.hrissuite.com
- Log in and follow the enrollment instructions on the screen.

Confirmation statements will be sent to the e-mail address you registered with online.

For State Employees Only HealthyKIDS Program



The HealthyKIDS program helps eligible State employees cover the cost of the premiums for their children enrolled in the State Employee Health Plan. The State will pay 90 percent of the cost of dependent children's health premiums for qualified families. Employees are responsible for the remaining 10 percent.

Eligibility for the HealthyKIDS program is based in part on family income. Children in households with incomes up to 250 percent of the Federal Poverty Levels, who would otherwise qualify for the Federal/State HealthWave program, may be eligible. Check out the income guideline chart link at www.kdheks.gov/hcf/sehp/HealthyKIDS.htm to see if you may qualify. There is additional information on this site which may help to determine your eligibility.

Annual enrollment is required. If you are applying mid-year due to a qualifying event, your application must be received no later than 31 days from the date of the qualifying event. If you believe you are eligible, complete the online enrollment form at:

<https://khap.kdhe.state.ks.us/hkapplication/>

Once your application has been processed, you will be notified whether or not you qualify. A letter will be sent to your home address currently on file. If approved, your premiums for coverage of your dependent children will be adjusted based upon the current HealthyKIDS contributions.



Choosing Your Health Plan: Plan A, Plan B or Plan C

You have access to all health plans regardless of where you live.

You have choices when it comes to your health care coverage. Choosing the appropriate health plan for you and your family may be easier than you think!

The State Employee Health Plan offers three health plan options:

- Plan A
- Plan B
- Plan C with Health Savings Account (HSA)

Each option is designed differently (for example, deductibles, coinsurance and annual maximums) and each health plan vendor offers unique features. Be sure to consider these features before making your selection.

There are three health plan vendors:

- Blue Cross and Blue Shield of Kansas
- Coventry
- UnitedHealthcare

Each of the three health plan vendors has a unique network of contracting providers. Since network providers agree to accept the plan allowance as payment in full, using network providers saves you money! Non network providers have not agreed to accept the plan allowance, so any amount above the plan allowance will be your responsibility. Review the provider directories at www.kdheks.gov/hcf/sehp/VendorProviderDirectories.htm

All options offer the following:

- Access to a broad network of providers nationwide which allows you flexibility in obtaining care with coverage for both network and non network providers.
- 100 percent coverage for certain preventive care services, such as an annual preventive exam, colonoscopy, mammograms and age-appropriate immunizations (including flu shots and allergy shots).
- Policies have no lifetime maximum.
- Prescription drug coverage through Caremark. See page 14 for details.

Plan A and Plan B

Both plans A and B have the Preferred Lab Benefit program available through Quest Diagnostics or Stormont-Vail HealthCare.

Please review the Health Plan Comparison Chart provided with this book to see the differences in the deductible, coinsurance and annual coinsurance maximums for Plans A and B.

Plan C with Health Savings Account (HSA)

Plan C has a few differences including:

- Premiums for coverage are lower than those for Plan A and Plan B.
- The deductible under Plan C is higher but your employer provides you with a contribution to your Health Savings Account (HSA) that can be used to help you pay for your deductible. See "Health Savings Account" on the next page for details.

- The Plan C Caremark Preferred Drug List is the same as Plans A and B. With Plan C, prescription drug purchases are subject to the deductible. In Plan Year 2014, network claims for prescription drugs purchased after the deductible has been satisfied will be covered at 100% if eligible under the pharmacy benefit.
- Most covered services are subject to the deductible. See the Health Plan Comparison Chart included with this booklet to see the deductibles and out-of-pocket costs.

Health Savings Account (HSA)

Through the HSA, you can set aside pre-tax money to pay for eligible health care expenses. Examples of the types of medical expenses that you can spend your HSA funds for include:

- Deductibles and coinsurance
- Dental, Drug and Vision expenses
- Over-the-counter medications, such as aspirin, cold medicines, antacids and cough supplements if you have a prescription from your doctor
- Contact lens solution or cleaners

Both you and your employer contribute money to the Health Savings Account (HSA). The maximum annual contribution to an HSA for 2014 is \$3,300 for single coverage and \$6,550 for dependent coverage. These maximums apply to the sum of you and your employer's contributions, so the maximum annual contribution for full time employees in 2014 is \$1,800 for single coverage and \$4,300 for dependent coverage. Members ages 55 + can make additional "catch up" contributions to their HSA each year until they enroll in Medicare. The additional catch-up contribution for 2014 remains at \$1,000.

HSA Worksheet			
	Employer Contribution	*Employee Contribution	Total Contribution Allowed
Full Time Employee			
Employee Only	\$1,500	\$25.00 - \$75.00 (\$1,800.00 total)	\$3,300.00
Employee + Dependents	\$2,250	\$25.00 - \$179.16 (\$4,300.00 total)	\$6,550.00
Part Time Employee			
Employee Only	\$1,125.20	\$25.00 - \$90.61 (\$2,174.80 total)	\$3,300.00
Employee + Dependents	\$1,687.60	\$25.00 - \$202.60 (\$4,862.40 total)	\$6,550.00
*The HSA contribution maximums for Employee + Spouse, Employee + Child(ren) or Employee + Family are the same. Note: The Employee Contribution column represents 24 semi-monthly payments. Employee contributions for 9 month Regents employees would be distributed evenly over 16 pay periods each year.			

For anyone electing coverage after January 1st, the Employer HSA Contributions will be pro-rated accordingly.

State Employees - the Employer HSA contribution amount will be made in two equal installments for Plan Year 2014.

- **For employees not enrolled in an FSA or with a zero balance in their Health Care FSA on December 31, 2013**, the 1st installment will be made during the 2nd pay period in January and the 2nd will be made during the 1st pay period in July.
- **For employees with a balance in their Health Care FSA on December 31, 2013**, the 1st installment will be made after March 15th on a prorated basis and the 2nd will be made during the 1st pay period in July.

Non State Employer Group (NSE Group) - Employees will need to check with their employer to see when the Employer HSA contribution will be made.

Both State and NSE Group Employer HSA contributions for new enrollments during the Plan Year will continue to be pro-rated.

US Bank will mail **new** enrollees an HSA debit card and account information that may be used to set up their online account access. This is where they can view their account activity and learn more about available account and investment options.

Visit www.kdheks.gov/hcf/sehp/HSA.htm for more information.

Your HSA belongs to you and is “portable” which means that even if you leave your employer, you take your account with you and can use it to pay eligible medical expenses. Since the account belongs to you, you are responsible for the account investments and fees, so be sure to review the HSA investment options and fees that apply. For specific details on the Health Savings Account (HSA), go to www.kdheks.gov/hcf/sehp/HSA.htm

IMPORTANT - For IRS Guidelines regarding eligibility for Plan C with a Health Savings Account (HSA), go to www.kdheks.gov/hcf/sehp/HSA.htm

Preferred Lab Benefit

Available with Plans A & B Only

To use the Preferred Lab Benefit, just present your Plan Year 2014 State Employee Health Plan ID card identifying your membership in either Plan A or B.

Quest Diagnostics continues to offer collection sites at various locations throughout the State of Kansas and nationwide. Also, you can arrange to have specimens picked up from your doctor's office. All it takes is a telephone call to the number on the back of your Quest ID card.

Stormont-Vail HealthCare offers 8 locations in northeast Kansas, for all State Employee Health Plan members. You do not have to be a Cotton O'Neil patient to access this benefit. Lab orders from your physician are required.

For details, go to www.kdheks.gov/hcf/sehp/PreferredLab.htm

PLEASE REMEMBER:

You must verbally request to use your Preferred Lab Benefit.

The Preferred Lab Benefit Program does NOT cover:

- Testing ordered during hospitalization
- Lab work needed on an emergency or STAT basis
- Testing done at any other laboratory
- Non-laboratory work such as mammography, x-rays, imaging and dental work
- Time sensitive, esoteric testing such as fertility testing, bone marrow studies and spinal fluid tests
- Testing not approved and/or covered by the State of Kansas Plans A or B
- Lab work billed to your health plan by your doctor or another laboratory
- Claims not paid as primary by the State Employee Health Plan

The Preferred Lab Benefit is completely voluntary. If you and your health care provider choose to use a lab other than those provided by either Quest Diagnostics or Stormont-Vail HealthCare, you still have laboratory coverage. However, you will be responsible for any deductible, copayments or coinsurance applied by the health plan.

Caremark Prescription Drug Plan

Prescription drug coverage is provided through Caremark for Plans A, B and C, and its cost is included in the health plan rates. While the Preferred Drug List (PDL) is the same for all plans, the amount you pay will vary depending on the plan you select as explained below.

- **Plan A and Plan B.** Under these plans, generally you pay a coinsurance for your prescription drug costs throughout the year, up to a combined coinsurance maximum of \$2,750 for single and \$5,500 for member with dependent coverage per year.
- **Plan C.** Until you reach the deductible, you will pay 100% of the discounted cost for your prescriptions when you present your Caremark ID card. Once you have reached your annual health plan deductible, covered prescriptions are paid in full by the plan when a network pharmacy is used. Remember, you can use the funds in your HSA to help pay for prescription costs applied to the deductible.

It is suggested that you print out the Preferred Drug List (PDL) from the website and take it to any appointments with your physician, so you can talk about your options. The PDL is updated quarterly, so please check for updates throughout the year. Regardless of which plan you elect, your out-of-pocket costs will be lower if you use generic and/or preferred brand name drugs. The PDL is available at either: www.kdheks.gov/hcf/sehp/Caremark.htm or www2.caremark.com/kse. You can also call Caremark at **800-294-6324** for help finding a preferred drug. A number of popular name brand drugs are projected to be available in generic versions during 2014. This list is also on the website.

The Caremark plan is designed to encourage you and your health care provider to choose the most cost-effective and clinically-effective medications available. Home delivery is available through Caremark and reorders are processed in as little as five to seven days. To place an initial order or reorder by phone, call 1-800-294-6324 or e-mail online@caremark.com

Specialty and biotech drugs are designed for difficult conditions that don't respond to traditional therapy. These drugs are available only through the Caremark Connect Specialty Pharmacy. Contact Caremark Connect at 1-800-237-2767. A Caremark representative will coordinate patient care with the provider and arrange for medication delivery.

For more information, go to www.kdheks.gov/hcf/sehp/Caremark.htm

Delta Dental Plan

Member only dental coverage is provided for all members enrolled in medical coverage. If you choose to enroll your dependents in dental coverage the same dependents enrolled in dental coverage must be enrolled in medical coverage. Dependent dental coverage may not be dropped during the plan year unless dependent medical coverage is also dropped.

You have access to two Delta Dental provider networks.

Delta Dental Premier Network

The Delta Dental Premier Network is the broad network of providers that you may use. Delta Premier Dentists agree to accept the plan allowance as payment in full. You will be responsible only for paying the specific coinsurance and deductibles for covered services in addition to any services not covered.

Delta Dental PPO Network

Delta Dental also offers the Delta Dental PPO network. The PPO network providers have agreed to a reduced fee for providing dental services. As a result, you generally pay a lower percentage of the total bill than you would when using a Premier (or Non Network) Provider. The PPO network for our group includes all PPO providers in the national DeltaUSA PPO network. Participants have the option to use the PPO providers whenever desired.

Enhanced & Basic Coverage

Preventive Care Services are always covered at 100 percent of the allowed amount. Ninety days after a preventive office visit or cleaning, the member is eligible for the Enhanced benefit. If the member has had at least one routine prophylaxis (cleaning) and/or preventive oral exam in the preceding 12 months, basic restorative services are subject to a coinsurance of 20% when provided by a PPO provider and 40% coinsurance when provided by a Premier or Non Network provider. Major restorative services are covered at the 50% coinsurance rate for all providers.

The Basic benefit applies when the member has not had at least one routine prophylaxis (cleaning) and/or preventive oral exam in the prior 12 months. The member is responsible for paying 50% coinsurance for all basic and major restorative services, regardless of provider. For those at the Basic benefit level, you must wait 90 days from your cleaning or exam to qualify for the Enhanced benefit level.

New employees will have a one year grace period at the Enhanced level to get their annual exam and cleaning. For more details on Delta Dental Benefits, go to www.kdheks.gov/hcf/sehp/Delta.htm

Superior Vision Services Plan

You are offered two vision plans through Superior Vision Services* — the Basic Plan and the Enhanced Plan. You may choose to enroll yourself and any eligible dependents in one of the vision plans, whether or not you or your dependents are enrolled in the health plan. If you choose dependent vision coverage, and dependent children are also enrolled in the medical plan, the dependent children enrolled in the vision plan must match those enrolled in the health plan. Please note that you can enroll or change your coverage only when you or a dependent first becomes eligible, during the annual open enrollment period, or if a dependent becomes ineligible. Mid-year changes to your vision coverage elections are not allowed even if you pay your premiums on an after-tax basis.

Basic Vision Plan Coverage

Exams under the Basic plan are subject to a \$50 copay. A \$25 material copay to lenses also applies to frame purchases but not contacts, then the policy covers:

- 100% on single-vision, standard bifocal, trifocal, or lenticular lenses.
- Up to \$100 retail allowance for frames
- Elective contact lens allowance of \$150
- Home delivery of contacts at www.svcontacts.com/
- Contact lens fitting benefit (with a \$35 copay)

Enhanced Vision Plan Coverage

The Enhanced vision plan includes all Basic plan coverage, along with:

- Standard progressive lenses covered up to \$165
- High-index lenses or poly-carbonate lenses covered up to \$116
- Scratch and UV coating
- Contact lens fitting fee (subject to a \$35 copay with limited coverage)
- Frame allowance on Enhanced plan is now \$150 retail allowance

Note: Enhanced benefits are not available from non network providers.

Special Features From Superior Vision Services

Discounts are available for lens add-ons or upgrades not otherwise covered by the plan. The discount is 20 percent and is available from providers identified in the Superior Vision provider directory with a "DP."

Discounts on additional eyewear. Discounts are available for additional eyewear purchases. The discounts range from 10 percent to 30 percent and are available at providers identified in the provider directory with a "DP."

Discounts on refractive surgeries such as LASIK, RK and PR K. Providers listed in the provider directory with the "RF" designation will provide Superior Vision members with a discount of 20 percent on refractive surgeries. For more details on vision benefits go to www.kdheks.gov/hcf/sehp/Superior.htm

**The Superior Vision Plan is underwritten by National Guardian Life Insurance Company. National Guardian Life Insurance Company is not affiliated with The Guardian Life Insurance Company of America, aka The Guardian or Guardian Life.*

For State Employees Only

Flexible Spending Account Program

Introducing NueSynergy – a leader in FSA technology

NueSynergy, headquartered in Leawood, Kansas, is the state's new FSA administrator effective the 2014 plan year. NueSynergy makes your FSA account management faster, easier and more convenient. Find helpful tools and details at www.KansasFSA.com

Remember, FSA Annual Enrollment is required by the IRS.

Your participation in an FSA does not carry over from one year to the next. Enroll in your FSA during open enrollment in October every year. Your new enrollment will become effective January 1st of the next year.

Note: When you elect to enroll in an FSA for Plan Year 2014, reimbursement is via direct deposit.

Go to www.KansasFSA.com to complete an ACH form.

Save on Eligible Medical and Daycare Expenses

A Flexible Spending Account (FSA) allows you to set aside up to \$2,500 on a pre-tax basis to pay for eligible medical, dental, and vision expenses, and up to \$5,000 on dependent care expenses. The amount you choose to contribute is taken out of your paycheck, in equal amounts each pay period, and reimbursed when a qualified expense is incurred. See the **Active State Employees Comparison Chart** for minimum and maximum FSA payroll deduction amounts. It's important to calculate the right amount to contribute to your FSA. Unlike a Health Savings Account, the amount in your FSA cannot be carried over from year to year as IRS regulations require that any unspent funds in your FSA are forfeited. **The "grace period" to incur expenses for Plan Year 2014 is March 15, 2015. The deadline to submit a claim is April 30, 2015.**

Note: To receive reimbursement for Dependent Care, you must submit your provider's Social Security Number or Employer Identification Number (EIN). There is no grace period for the Dependent Care FSA. You have until April 30, 2014, to submit documentation for reimbursement of the Plan Year 2014 dependent care expenses. Plan the amount you put into your FSA carefully so that it does not exceed the amount you are likely to pay for eligible expenses.

Easily access your FSA funds with direct deposit and free debit card

At enrollment, you'll complete a mandatory direct-deposit form, and you can also select to receive your free Kansas FSA debit card. By using the debit card, you'll rarely have out-of-pocket expenses, you'll have access to the full plan-year amount on January 1, 2014, and you'll eliminate paper claims submissions.

Increase your take-home pay by as much as 25%

Nearly everyone can benefit from enrolling in an FSA. For every dollar set aside from your paycheck to your FSA plan, you save on taxes that are not withheld. By reducing your income taxes, you increase your take-home pay. It's that easy!

Here's the savings potential

An employee who earns \$32,000 annually (\$1,333.33 per bi-monthly payroll) elects to set aside \$250 per pay period (pre-tax) to cover the cost of insurance, health and daycare expenses. In this example, the individual's increase in take-home pay is \$144.48 per month. (See chart).

	Without FSA	With FSA
Gross Earnings	\$1,333.33	\$1,333.33
FICA, Fed/State taxes	\$275.48	\$203.24
Insurance Premiums	\$50.00	\$50.00
Health & Daycare Exp.	\$200.00	\$200.00
Net Earnings	\$807.85	\$880.09
Total Savings Per Paycheck		\$72.24
Total Savings Per Month		\$144.48
Total Savings Per Year		\$1,733.76

Three Ways to Save - You have three FSA plan choices to help you save money:

- 1 Health Care FSA** - With this account you are able to pay for eligible medical, dental, prescription, and vision expenses not covered by insurance. Examples of eligible expenses:

Co-pays & deductibles

Prescriptions

Chiropractic care

Diagnostic tests

Hearing aids

Hospital services

Insulin

Medical equipment

Physical or speech therapy

- 2 Dependent Care FSA** - If you have dependent care costs for a child under the age of 13 or a dependent who is unable to care for themselves, you should consider the dependent care FSA. As long as both spouses or custodial parents are employed, you can contribute up to \$5,000 pre-tax per calendar year to pay for expenses such as:

Before- and after-school programs

Nursery school & preschool

Day care (child & adult)

Summer day camp

Note: A Dependent Care FSA can also be used for a spouse who is unable to care for themselves.

- 3 Limited Purpose FSA** - If you have a Health Savings Account (HSA), enrolling in a Limited Purpose FSA is a great way to save your HSA dollars. You can use your Limited FSA funds to pay for dental and vision expenses while conserving your HSA dollars for future medical expenses.

Contact lenses

Laser eye surgery

Eye glasses

Orthodontics

What's New

NueSynergy makes it faster, easier and more convenient to access and manage your FSA dollars. With NueSynergy, you'll have these new benefits in 2014:

NEW

Online WealthCare Portal

State employees will have their own FSA portal at **www.KansasFSA.com**. Initially this site will provide information about enrollment. After the conversion process, you'll have 24/7 access to detailed account information. You can check your balance, view recent transactions, and submit claims online.



No need to convert your claims documentation to PDF. NueSynergy accepts most images and file types: JPG, JPEG, GIF, PNG, TIFF, XLS, DOC and PDF.

NEW Benefit!

NueSynergy Mobile App

The NueSynergy mobile app gives you on-the-go access to your FSA account balances and plan details. With the mobile app, you can:

- Review recent transactions
- Read all e-mail and text alerts
- Submit claim documentation
- Contact NueSynergy customer service



Submit claim documentation simply by taking a photo.



FREE!

FSA Debit Card

In the 2014 plan year, Kansas employees may elect to receive a free FSA debit card at Open Enrollment. Selecting the debit card option gives you access to all your 2014 plan year FSA dollars on January 1, 2014.

- Easy to elect – simply click the debit card option during enrollment
- No more paper claims submission
- Eliminates up-front out-of-pocket expenses



New! Use your debit card to pay for dependent care expenses

New! Access 2013 grace period funds in 2014

New! Use your debit card for qualified Limited Purpose FSA expenses

NEW Benefit!

Custom FSA Calculator

Want to see your savings potential with an FSA? Simply go to **www.KansasFSA.com** and click the Custom Calculator. The calculator is pre-loaded with State of Kansas plan details, so you can get a quick and easy look at what you can save.

How Much Should I Contribute to my FSA?	
Estimated Annual Out-of-Pocket Costs	\$1,642
Amount I want to contribute to my FSA Annually	\$1,642
Per your employer, the most you may contribute annually is:	\$2,500
Amount to Contribute annually to your FSA	\$1,642
Amount to Contribute Per Pay Period	\$68
Estimated Annual Tax Savings	\$490

Customer Service: 855-750-9440

Monday - Friday, 7:30 a.m. - 5:00 p.m.

Fax: 855-890-7238

E-mail: customerservice@nuesynergy.com

Website: www.KansasFSA.com

Powered by



Transitioning Your ASI Flex Account

If you had an FSA in 2013, please keep in mind important dates listed below. NueSynergy will handle all claims in the new 2014 plan year, including the 2013 grace period.

When do I stop using my FSA “Benny Card”?

Your FSA debit card issued from ASI Flex will stop working on December 13, 2013, at 11:59 p.m. CST. You can continue to submit manual claims to ASI through December 30, 2013.

Will my direct deposit information transfer from ASI?

No, you will need to establish your direct deposit with NueSynergy by December 31, 2013, to ensure there is not a delay in receiving reimbursement for any claims. You can setup your direct deposit by going to www.KansasFSA.com

When do I stop submitting claims to ASI Flex?

After December 30, 2013, ASI will no longer accept FSA claims. You will need to hold onto your receipts through the claims blackout period (December 30 - January 8) while any remaining 2013 account balance is transferred to NueSynergy. You will have access to any remaining 2013 FSA fund balance on January 9, 2014.

During the blackout period, from December 30 through January 8, you will be able to use your NueSynergy debit card, but during this eight-day period, you will be drawing from 2014 funds. Beginning January 9, claims will be paid from 2013 funds first, until depleted, and then reimbursements will be drawn from 2014 funds.

For more about NueSynergy and the FSA plan visit www.KansasFSA.com

Key Dates

December 13, 2013

“Benny Card” (ASI Flex) turned off

December 16, 2013

NueSynergy debit card mailed

December 30, 2013

ASI stops accepting claims

December 31, 2013

Last day to set up direct deposit with NueSynergy

December 30, 2013 - January 8, 2014

Blackout period (no access to 2013 funds)

January 1, 2014

NueSynergy debit card use begins (drawing from 2014 funds)
NueSynergy will begin processing manual claims for 2014

January 9, 2014

NueSynergy begins paying 2013 grace period claims*
NueSynergy debit card loaded with remaining 2013 balance*

March 15, 2014

Last day to incur claims against 2013 funds.

April 30, 2014

Last day to file a claim under the 2013 funds grace period

Look for details about
NueSynergy webinars and
Open Enrollment meetings:

September 23 – October 21

Specific dates and times will be
posted on www.KansasFSA.com

*Claims will be paid from 2013 funds first, until depleted, and then reimbursements will be drawn from 2014 funds.

HealthQuest (HQ) Rewards Program

HealthQuest Rewards Program Premium Incentive Discount - www.kansashealthquest.com

State and Non State employees who are enrolled in the State Employee Health Plan are eligible to participate in these programs and to receive the premium incentive discount. From August 1, 2013 through July 31, 2014, employees have an opportunity to earn credits by participating in wellness activities offered through HealthQuest. Employees who complete a health assessment questionnaire (worth 10 credits) and earn an additional 20 credits for a total of 30 credits by July 31, 2014, are eligible for a \$480 premium incentive discount on their 2015 Health Plan premiums.

Members may select from a wide variety of online, telephonic and in-person programs to earn credits. **Please note that completion of the Health Assessment Questionnaire is required to earn the HealthQuest premium incentive discount.**

Benefits eligible employees who have waived coverage, as well as spouses and dependents (age 18 and older) who are enrolled in the State Employee Health Plan can participate in these programs but are not eligible for the premium discount.

PROGRAMS

Below are the programs available to earn credits toward the premium incentive discount. To learn more, go to the HealthQuest website - www.kdheks.gov/hcf/healthquest/rewards.html

• **Biometric Screening**

HealthQuest offers three ways to obtain your biometric numbers needed to complete the health assessment questionnaire:

- 1. Attend a free onsite biometric screening** offered by HealthQuest at many locations statewide.
- 2. Use biometric results from your personal physician.** Members may use results from a recent physician's visit to complete the health assessment questionnaire. Print the **Biometric Values Form**, located on the HealthQuest website, and take it with you to the appointment.
- 3. Order an at-home screening kit.** A test kit is mailed to you to collect your own blood sample through a simple finger stick test. The at-home test kit does not include results for blood pressure, height, weight and waist circumference needed to complete your online health assessment questionnaire.

• **Health Assessment Questionnaire - REQUIRED - (10 credits)**

Using results obtained from a biometric screening, doctor visit, or at-home screening kit, complete an online health assessment questionnaire to receive valuable health information. The health assessment questionnaire is required to earn the HQ premium incentive discount.

- **Non Tobacco User Declaration (10 credits)** - *Self Report Form online*
- **Tobacco Cessation Program (10 credits)** - *Enroll online or call toll-free 1-888-275-1205 (option 3)*
- **Condition Management (10 credits)** - *Call toll-free 1-888-275-1205 (option 1)*
- **Health Coaching (10 credits)** - *Enroll online or call toll-free 1-888-275-1205 (option 4)*
- **Health Advisor Call (5 credits)** - *Call toll-free 1-888-275-1205 (option 6)*
- **Healthy Living Programs (5 credits each)** - *Interactive personalized online tutorials*
- **Wellness Challenges (5 credits each)** - www.kdheks.gov/hcf/healthquest/challenges.html
- **Preventive Exams (5 credits each)** - *Self Report Form online*
- **Monthly Seminars (2 credits each)** - *Online*
- **Conversations (2 credits each)** - *Online*
- **Health and Fitness Activities (2 credits each)** - *Self Report Form online*
- **Nurse24 (2 credits)** - *Call toll-free 1-888-275-1205 (option 2)*

Employee Assistance Program (EAP)

New Vendor for Plan Year 2014 - ComPsych

New Offerings Coming January 1, 2014

Eligibility

All active, benefits-eligible employees of the State of Kansas and our Non State Employer Groups, their dependents and other family members living in the same household are eligible to use the EAP.

With a single call to **1-888-275-1205 (option 7)**, you and your family members can receive confidential assistance 24 hours a day, seven days a week at no cost to you.

Confidential Personal Counseling

The EAP provides short-term counseling to you, your spouse and your dependents for a wide range of personal and family concerns. It is staffed by highly trained master's and doctoral level clinicians who will listen to your concerns and quickly refer you to in-person counseling and other resources.

Counseling services include:

- Family and parenting concerns
- Marital and relationship issues
- Work-related concerns
- Alcohol and substance abuse issues
- Improving communications and self-esteem
- Major life event changes
- Grief and loss
- Stress, anxiety and depression

Work-Life Solutions

The EAP Staff of referral and research specialists will help you complete your "to-do" list by providing qualified referrals and customized resources for:

- Child and elder care
- Moving and relocation
- Making major purchases
- College planning
- Pet care
- Home repair

Legal Advice and Discounts

The EAP provides confidential telephonic legal consultation with an attorney who specializes in the area of your concern, at no charge to you. If you need legal representation, you will be referred to a qualified attorney in your area for a free 30-minute consultation with a 25 percent reduction in the customary legal fees thereafter.

The most common requests include:

- Divorce and family law
- Real estate transactions
- Wills and estate planning questions
- Consumer and bankruptcy issues
- Landlord and tenant disputes
- Criminal/civil lawsuits

Personal Money Management Advice

The EAP provides employees and their family members with access to financial specialists with a broad range of experience in personal financial services.

Call any time for a consultation on topics such as:

- Home budgeting
- Debt consolidation
- Credit matters
- College funding
- Retirement questions
- Tax issues
- Investments
- Estate planning

EAP Online

Coming soon - EAP Online will be your one stop for expert information on the issues that matter most to you... relationships, work, school, children, legal, financial, free time and more. Access articles, watch videos, conduct searches and get personal responses to your questions in one location.

Notes:

[illegible]

Notes:

[illegible]

The Kansas State Employees Health Care Commission (HCC) reserves the right to suspend, revoke or modify the benefit programs offered to members. Nothing in this booklet shall be construed as a contract of employment between the employer and any member, nor as a guarantee of any member to be continued in the employment of the employer, nor as a limitation on the right of the employer to discharge any of its members with or without cause.

In this booklet, "you" refers to eligible members.